



HUMAN  
SERVICES  
DEPARTMENT



NOON ZOOM  
SEPTEMBER 20<sup>TH</sup>, 2023

LORELEI KELLOGG MAD

*INVESTING FOR TOMORROW, DELIVERING TODAY.*

# PROVIDER RATE INCREASES

*Investing for tomorrow, delivering today.*

# HB2 INCREASE – SEPTEMBER UPDATES

- LOD #103 shared with MCOs 9/13
- All rate increases and retro adjustments must be made within 60 days – 11/12
- Full LOD can be found below:

[https://www.hsd.state.nm.us/wp-content/uploads/Final-LOD-103-State-Fiscal-Year-2024-Payment-Rate-Increases\\_wAttachment.pdf](https://www.hsd.state.nm.us/wp-content/uploads/Final-LOD-103-State-Fiscal-Year-2024-Payment-Rate-Increases_wAttachment.pdf)



## Letter of Direction #103

**Date:** September 12, 2023

**To:** Centennial Care 2.0 Managed Care Organizations

**From:** Lorelei Kellogg, Acting Director, Medical Assistance Division ✍

**Subject:** Medicaid Provider Payment Rates

**Title:** State Fiscal Year 2024 Payment Rate Increases

The New Mexico Human Services Department (HSD) is announcing its intention to raise Medicaid provider payment rates effective July 1, 2023, and outlined in House Bill 2 (HB2). Raising Medicaid payment rates will ensure access to high-quality care for Medicaid members through appropriate reimbursement of health care services as well as attract and retain healthcare providers to New Mexico. HSD believes that these rate adjustments will help build and protect the New Mexico Medicaid health care delivery network. The proposed rate increases were supported, endorsed and funded by the New Mexico Legislature during the 2023 regular session.

The purpose of this Letter of Direction (LOD) is to direct Managed Care Organizations (MCO) on the implementation of the provider rate increases that are described in the (June 28<sup>th</sup>, 2023) public notice. This increase shall apply to each providers contracted rates with each MCO. As outlined in HB2 the MCOs shall not negotiate less than the Medicaid fee-for-services (FFS) rate. This includes rates negotiated between MCOs and sub vendors or sub-contractors. Any rate paid to providers for services to Medicaid members within the state of NM must use the MAD FFS rate as the minimum rate. The Agency expects MCOs to maintain current levels of reimbursement for providers who may be contracted above the rate increases outlined in this LOD.

1. For Maternal & Child Health, Physician & Other Practitioners, and Behavioral Health service areas MCOs are directed to increase payment to a **minimum of 120% of the 2023 Medicare fee schedule**, retroactive to July 1<sup>st</sup>, 2023, as defined in the rate table attached. This increase shall apply to each provider's contracted rates with each MCO.
2. For all codes in other service areas where Medicare FFS rates are available MCOs are directed to increase payment to a **minimum of 100% of the 2023 Medicare fee schedule**, retroactive to July 1, 2023, as defined in the rate table attached. This increase shall apply to each provider's contracted rates with each MCO.
3. For all other identified codes in other service areas without a Medicare rate, MCOs are directed to increase payment to **at least the FFS amount on the table attached**, retroactive to July 1st, 2023. This increase shall apply to each providers contracted rates with each MCO.

# TURQUOISE CARE CONTRACTS

*Investing for tomorrow, delivering today.*

# TURQUOISE CARE

- Currently in black out period
- Awarded plans are Molina, United, BCBS, PHP
- Contract start date of 7/1/24

<https://www.hsd.state.nm.us/2022-turquoise-care-mco-rfp-procurement-library/>

**Turquoise Care Medicaid Managed Care Request for Proposals (RFP# 23-630-8000-0001) and Procurement Library**

**[Notice to Rescind the January 30, 2023 Termination of Turquoise Care Managed Care Request for Proposals \(RFP# 23-630-8000-0001\)](#)**

**[Notice of Termination of Turquoise Care Medicaid Managed Care Request for Proposals \(RFP# 23-630-8000-0001\)](#)**

The purpose of this Request for Proposals (RFP) is to solicit competitive, sealed proposals from Managed Care Organizations (MCOs) to provide services to Members of the New Mexico Medicaid managed care program, hereinafter referred to as "Turquoise Care," beginning in 2024.

# PROVIDER ENROLLMENT UPDATES

*Investing for tomorrow, delivering today.*

# Provider Disenrollment Due to the of End of the Public Health Emergency Flexibilities

- With the close of the Public Health Emergency (PHE), the suspension of provider terminations has ended. Due to this, an E-Blast sent on June 30, 2023, from Conduent informing Medicaid providers they would be terminated if their record has expired licenses and certification documents after August 22, 2023. Any provider which did not update their record was terminated on September 1, 2023.
- As of September 8, 2023, BH Medicaid providers which were terminated due to an expired license have temporarily been reinstated until **November 5, 2023**.
- Providers must use this time to provide the necessary documents before or by November 5<sup>th</sup> to ensure they are not terminated with an effective date of November 1<sup>st</sup>.
- The Medical Assistance Division (MAD) has directed Conduent and MCOs to reprocess denied claims for impacted providers. No further action is necessary for providers

# HSD Must Comply with Federal and State Requirements

- HSD must comply with Federal and State requirements and providers must submit required documentation to ensure that their enrollment stays active.
- The provider alerts distributed on September 8, 2023, through the NM Medicaid Portal, BHSDSTAR, and NM Recovery includes a link where providers may upload their supporting documents.
- BHSD has utilized the following partners to send eblasts out to the BH community:
  - The Administrative Services Organization-Falling Colors-sent out information 9/11/23.
  - [www.nmrecovery.org](http://www.nmrecovery.org) sent out information on 9/8/23.
  - New Mexico Opioid Hub (5,190 emails on the listserv)-sent out information on 9/11/23.
- HSD is working on a post card mail out to providers.



# Are your credentials up to date with Medicaid?

Medicaid has temporarily reinstated any disenrolled providers to ensure that required documentation is submitted.

This includes documents such as, but not limited to:

- Business licensure
- Professional licensure
- Certification
- Joint Commission on Accreditation of Healthcare Organizations (JACHO),
- Centers for Medicare and Medicaid Services Letter (CMS),
- Commission on Accreditation of Rehabilitation Facilities (CARF) letter in addition to the licenses.

Providers are required to submit outstanding documents in order to continue serving Medicaid members no later than, **November 5, 2023**.

**Don't get disenrolled!** You can upload your documents using the below link:

<https://nmmedicaid.portal.conduent.com/webportal/licenseUpload?lastNodeClicked=804>

For questions or concerns, please contact the Consolidated Customer Service Center at 1-800-299-7304

## Provider Enrollment

### NPI: What You Need to Know (cms.gov)

The NPI is a Health Insurance Portability and Accountability Act (HIPAA) Administrative Standard. An NPI is a unique identification number for covered health care providers, created to improve the efficiency and effectiveness of electronic transmission of health information. Covered health care providers, all health plans, and health care clearinghouses must use NPIs in their administrative and financial transactions. The HIPAA Administrative Simplification provisions required the adoption of a standard, unique health identifier for each health care provider. The NPI Final Rule, published on January 23, 2004, established the NPI as this standard. CMS developed the National Plan and Provider Enumeration System (NPPES) to assign these unique identifiers. For more information on how to apply for an NPI, refer to the NPPES webpage [NPPES \(hhs.gov\)](#).

Topic	PowerPoint	Adobe
Provider Enrollment Workshop	<a href="#">PPT Format</a>	<a href="#">PDF Format</a>
Behavioral Health Provider Enrollment Workshop	<a href="#">PPT Format</a>	<a href="#">PDF Format</a>
Online Provider Update	<a href="#">PPT Format</a>	<a href="#">PDF Format</a>

### Online Provider Enrollment and MCO-only Provider Registration

Click [here](#) to complete your Online Provider Participation Agreement (PPA) MAD 312 and 335 online. Applications can be submitted for Fee-For-Service (FFS) and Managed Care Organization (MCO) network providers.

The benefits of applying online:

- Online applications are processed on average 3 weeks sooner than paper applications due to manual processing steps
- Step-by-step fill in the box entry with online edits to prevent common mistakes
- Easy upload of documents to accompany your application
- Applications are sent directly and immediately to Conduent Provider Enrollment

If you are unable to submit an application online, click the appropriate link to print the [MAD335](#) or [MAD312](#) paper application or contact the Consolidated Customer Service Center (CCSC) for assistance at 1-800-299-7304.

The Provider Type & Specialty Listing combinations are in the process of being updated in the online Provider Participation Agreement (PPA) applications. Providers may complete a paper application if the appropriate provider type and/or specialty is not available on the online enrollment application. Provider type and specialty listings should be available for online PPA applications in the next few weeks.

If you are unsure if you or your organization are already enrolled in the New Mexico Medicaid program, please use the [Provider Search](#) tool to verify status. If you have any further questions or need assistance, please contact the Consolidated Customer Service Center (CCSC) at 1-800-299-7304.

### Downloading Tips

Topic	Word	Adobe
Provider Type & Specialty Listing	<a href="#">Excel Format</a>	Not Available
New Mexico Provider Update Form	<a href="#">Word Format</a>	Not Available
New Mexico Provider Update Instructions	<a href="#">Word Format</a>	Not Available

# Provider Type and Specialty List

Please use the below link on the Medicaid Portal, under Provider Enrollment section, to review the required documents associated with your Provider Type and Specialty Code (if applicable).

<https://nmmedicaid.portal.conduent.com/static/ProviderInformation.htm>

# Required Documents to Continue enrollment with NM Medicaid

- Before uploading documents on the Medicaid Portal, please make sure you understand requirements for your Provider Type and Specialty Code.
- Please refer to HSD MAD Provider Types and Specialty list.
- Columns H, I and J lists the requirements that corresponds to the Provider Type on column A and Specialty code on column C.

H	I	J
<b>HSD MAD Provider Type &amp; Specialty List August 2023</b>		
REQUIREMENTS for MAD 335 APPLICANTS USING A FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN) for TAX ID PURPOSES (Documentation must be submitted with the PPA)	REQUIREMENTS for MAD 335 APPLICANTS USING A SOCIAL SECURITY NUMBER (SSN) for TAX ID PURPOSES (Documentation must be submitted with the PPA)	REQUIREMENTS FOR MAD 312 APPLICANTS (Documentation must be submitted with the PPA)
<ul style="list-style-type: none"> <li>• City or County Business License</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> <li>• DEA Certificate (if applicable)</li> <li>• Federal tax identification letter</li> <li>• Completed W-9 form</li> </ul>	<ul style="list-style-type: none"> <li>• Copy of Physician License</li> <li>• Copy of National Board Certification or proof of Training or Fellowship in the requested Specialty area (residency program certification, or letter from chairperson of Residency program stating that training was received in the Specialty area)</li> <li>• City or County Business License</li> <li>• DEA Certificate (if applicable)</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> <li>• Completed W-9 form</li> </ul> <p>• <b>Specialty 150</b> requires Self Attestation of meeting Autism Evaluation Practitioner (AEP) requirements as specified in 8.321.2 NMAC or its successor; and the provider must also have an additional specialty. AEP Attestation Template found at: <a href="https://www.hsd.state.nm.us/providers/faba-applied-behavior-analysis-provider-information/">https://www.hsd.state.nm.us/providers/faba-applied-behavior-analysis-provider-information/</a></p>	<ul style="list-style-type: none"> <li>• Copy of Physician License</li> <li>• Copy of National Board Certification or proof of Training or Fellowship in the requested Specialty area, residency program certification, or letter from chairperson of Residency program stating that training was received in the Specialty area</li> <li>• DEA Certificate (if applicable)</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> </ul> <p>• <b>Specialty 150</b> requires Self Attestation of meeting Autism Evaluation Practitioner (AEP) requirements as specified in 8.321.2 NMAC or its successor; and the provider must also have an additional specialty. AEP Attestation Template found at: <a href="https://www.hsd.state.nm.us/providers/faba-applied-behavior-analysis-provider-information/">https://www.hsd.state.nm.us/providers/faba-applied-behavior-analysis-provider-information/</a></p>
<ul style="list-style-type: none"> <li>• City or County Business License</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> <li>• DEA Certificate (if applicable)</li> <li>• Federal tax identification letter</li> <li>• Completed W-9 form</li> </ul>	<ul style="list-style-type: none"> <li>• Copy of Physician License</li> <li>• Copy of National Board Certification or proof of Training or Fellowship in the requested Specialty area (residency program certification, or letter from chairperson of Residency program stating that training was received in the Specialty area)</li> <li>• City or County Business License</li> <li>• DEA Certificate (if applicable)</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> <li>• Completed W-9 form</li> </ul> <p>• <b>Specialty 150</b> requires Self Attestation of meeting Autism Evaluation Practitioner (AEP) requirements as specified in 8.321.2 NMAC or its successor; and the provider must also have an additional specialty. AEP Attestation Template found at: <a href="https://www.hsd.state.nm.us/providers/faba-applied-behavior-analysis-provider-information/">https://www.hsd.state.nm.us/providers/faba-applied-behavior-analysis-provider-information/</a></p>	<ul style="list-style-type: none"> <li>• Copy of Physician License</li> <li>• Copy of National Board Certification or proof of Training or Fellowship in the requested Specialty area, residency program certification, or letter from chairperson of Residency program stating that training was received in the Specialty area</li> <li>• DEA Certificate (if applicable)</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> </ul> <p>• <b>Specialty 150 only</b> requires Self Attestation of meeting Autism Evaluation Practitioner (AEP) requirements as specified in 8.321.2 NMAC or its successor; and the provider must also have an additional specialty. AEP Attestation Template found at: <a href="https://www.hsd.state.nm.us/providers/faba-applied-behavior-analysis-provider-information/">https://www.hsd.state.nm.us/providers/faba-applied-behavior-analysis-provider-information/</a></p>
<ul style="list-style-type: none"> <li>• City or County Business License</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> <li>• DEA Certificate (if applicable)</li> <li>• Federal tax identification letter</li> <li>• Completed W-9 form</li> </ul>	<ul style="list-style-type: none"> <li>• Copy of Naturopathic Doctor (ND) License</li> <li>• City or County Business License</li> <li>• DEA Certificate (if applicable)</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> <li>• Completed W-9 form</li> </ul>	<ul style="list-style-type: none"> <li>• Copy of Naturopathic Doctor (ND) License</li> <li>• DEA Certificate (if applicable)</li> <li>• Proof of malpractice, professional liability, or medical liability insurance</li> </ul>

# Upload License Page

You can upload your documents using the below link:


<https://nmmedicaid.portal.conduent.com/webportal/licenseUpload?lastNodeClicked=804>

**Provider Enrollment – Upload License page**

This Upload License option is an alternative to faxed license updates. Please verify the expiration date of the license. If your license will expire in the next 30 days, please obtain and submit a more current license. If your license will expire in less than 30 days, please be sure to submit up-to-date license information when it becomes available. Please allow an additional 1-2 business days to process your submission accordingly. If you have a web portal user ID and are the master administrator for your organization, please log in and visit the Provider Update page for faster service.

You must enter a valid New Mexico Medicaid Provider ID in order to proceed. If you do not know your Medicaid Provider ID, please use our [Provider Search](#) feature to search by NPI or provider name and confirm your provider ID.

Please contact the Consolidated Customer Service Center (CCSC) at 1-800-299-7304 if you have any questions or need assistance.

* Email Address:	<input type="text"/>
* Medicaid Provider ID :	<input type="text"/>
* License expiration	<input type="text" value="mm/dd/ccyy"/> 

**Upload Attachments**

**Submit**

[Please click here to cancel attachments.](#)

# Turn Around Document (TAD)/Recertification and Risk-Based Screening

## PUBLIC INFORMATION

View valuable information about the New Mexico Medicaid program, including:

- **Provider Online Application and TAD/Reverification**
- Provider Update Form
- Provider Update Instructions
- Training Presentations and Webinars
- Fee Schedules
- New Mexico Medicaid E-News
- Provider Information
- Electronic Visit Verification (EVV)
- **Self-Direction FMA Forms (Mi Via, Supports Waiver & Self-Directed Community Benefit)**
- Centennial Care 2.0 FAQ
- Provider Search
- Vendor Payment Request (VPR)
- Vendor Payment Request (VPR) Instructions
- Mi Via Grievance Escalation Form
- Formulario de escalamiento de quejas de Mi Via
- MNC Validation Outreach Cover Sheet

- All providers with past-due TAD/recertification or outstanding risk-based screenings due to the PHE must complete all required actions by November 11, 2023.
- You can submit TAD/Reverification electronically on the New Mexico Medicaid Web Portal. Please use the following link:  
<https://nmmedicaid.portal.conduent.com/static/index.htm>

# PUBLIC HEALTH ORDER

*Investing for tomorrow, delivering today.*

## PUBLIC HEALTH ORDER – COLLABORATION WITH BHSD AND DOH

**PUBLIC HEALTH ORDER  
NEW MEXICO DEPARTMENT OF HEALTH  
SECRETARY PATRICK M. ALLEN**

September 15, 2023

**Amended Public Health Emergency Order Imposing Temporary Firearm  
Restrictions, Drug Monitoring and Other Public Safety Measures**

(8) All participating New Mexico Managed Care Organizations shall immediately ensure that individuals who need drug or alcohol treatment have received a permanent, adequate treatment placement within 24 hours of the request.

(9) **The New Mexico Human Services Department** shall send relevant Managed Care Organizations letters of direction requiring them to provide their plans to achieve continual behavioral health network adequacy.

- HSD working in collaboration with DOH and BHSD
- Identify expenditures on Gun related injury and death
- Letter Of Direction has been shared with MCOs
- MCO plans will be submitted to the agency within 30 days



HUMAN  
SERVICES  
D E P A R T M E N T



# QUESTIONS

*INVESTING FOR TOMORROW, DELIVERING TODAY.*